									Application or Docket Number				
	PATENT	ORE	1	0992028/									
	CLAIMS AS FILED - PART I								<u> </u>				
L			(Column 1)		(Column 2)		_	SMALL TYPE	EMILLA	OF		OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			73					RATE	FEE	_	RATE		
F	FOR		NUMBE	NUMBER FILED		NUMBER EXTRA		BASIC FI			L	FEE 710.00	
Ţ	TOTAL CHARGEABLE CLAIMS		구☆ minus 20=		. 53			X\$ 9=	 	Ⅎొ	1	110.00	
×	DEPENDENT C	⊔ minus 3 =					X40=	1		Vac	954		
М	ULTIPLE DEPE	NDENT CLAIM F	RESENT						+	-OR		80	
• ;	* If the difference in column 1 is/less than zero, enter "0" in column 2							+135=	 	OR	+270=		
	CLAIMS AS AMENDED - PART II								<u></u>	OR	TOTAL	1741	
(Column 1) (Column 2) (Column 3)							L	SMALL	ENTITY	OR		THAN ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID F	HER	PRESENT EXTRA		RATE	ADDI- TIONAI FÈE		RATE	ADOI- TIONAL FEE	
	Total	. 73	Minus	1. 2	3	=		X\$ 9=		OR	X\$18=	7	
¥	Independent	NTATION OF M	Minus JLTIPLE DE	PENDENT	CI AIM	•		X40=		OR	X80=		
							۱ [+135=		OR	+270=		
								TOTAL		OR	TOTAL	/	
		(Column 1)		(Colum	n 2)	(Column 3)		DOIT. FEE		7	ADOIT. FEE	4	
8		CLAIMS REMAINING		HIGHE	ST EA USLY	PRESENT EXTRA	\prod	RATE	ADDI-	1	RATE	ADDI-	
		AFTER AMENDMENT		PREVIO					TIONAL FEE			TIONAL	
AMENDMENT	Total	. 73	Minus	- 7	3	• /		X\$ 9=	766	OR	X\$18=	FEE	
AME	Independent	. 4	Minus	4		• /	r	X40=		1 "	X80=	-/-	
	FINST PRESE	NTATION OF MU	LTIPLE DEI	PENDENT C	MIALK		H			OR		-/	
		. (6	_				L	+135 -		OR	+270=		
	12.14.1	0 Y.					AO	TOTAL DIT, FEE		OR ,	TOTALI DOIT, FEE		
_	•	(Column 1)		(Column	12)	(Column 3)							
ENTC		REMAINING AFTER AMENDMENT		NUMBE PREVIOU PAID FO	R	PRESENT EXTRA	Γ	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL	
	Total	· 43	Minus	M	5	_ /	1	K\$ 9=	PEE	 		FEE	
AMENDA	independent	. 4	Minus		<i>J.</i>	-/-	-	X40=		OR	X\$18=		
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	X80=		
	If the entry in extrem 1 is less than the entry in each own a									ОЯ	+270=		
"If the entry in column 1 is less than the entry in column 2, write "I' in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "2." ADDIT. FEE OR ADDIT. FEE													
П	me regnest Num dauH taefighe ei	iber Previously Paid at Previously Paid	ror in THE For (Total or	s SPACE is h Independent	iss than) is the !	3, enter "3," Vgheet number l				~4	лл. Рее <u>L</u> M 1.		
									,		11		

FORM PTO-475 (Rev. 8/00)